



Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 1997

			AS FILED -	PART	. 1					ALL ENTITY		
505	<u> </u>		Column 1)	- Т		umn 2)	1 1	TYPE			OR	
FOR NUMBER FILED			NUMBER	EXTRA		RATE	FEE]	RATE		
BAS	BASIC FEE							395.00		OR	OR	
тот	TOTAL CLAIMS 50 minus 20 = * 30						x\$11=			OR	OR x\$22=	
INDE	INDEPENDENT CLAIMS # minus 3 = * /							x41=	:		OR	OR x82=
MULTIPLE DEPENDENT CLAIM PRESENT							+135=			OR	OR +270=	
* If t	* If the difference in column 1 is less than zero, enter "0" in column 2						1	TOTAL		OF		
	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						_	SMALL	ENTITY	OF	₹	OTHE SMALI
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NL PRE	GHEST JMBER VIOUSLY ID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE			RATE
NDM	Total	*	Minus	**		=		x\$11=		OR	i	x\$22=
ME	Independent	*	Minus	***		=		x41=		OR		x82=
۷	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					+135=		OR		+270=		
							A	TOTAL DDIT. FEE		OR		TOTAL ADDIT. FEE
	• • 4 • • 1	(Column 1) CLAIMS	• • • • • • • • • • • • • • • • • • •		olumn 2) GHEST	(Column 3))]			•	•	ADDIII. 1
ENT B		REMAINING AFTER AMENDMENT		NU PRE	JMBER VIOUSLY ID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE			RATE
NDMENT	Total	. 72	Minus	**	SA	= 22		x\$11=		OR		x\$232
	Independent	• 3	Minus	***	4	=		x41=		OR		x82=
⋖ —	FIRST PRES	SENTATION OF	MULTIPLE	DEPE	NDENT CL	AIM		+135=		OR		+270=
		(Column 1)		(Co	olumn 2)	(Column 3)	A	TOTAL DDIT. FEE		OR		TOTAL ADDIT. FÉE
ENTC		CLAIMS REMAINING AFTER AMENDMENT		NU PRE	GHEST JMBER VIOUSLY ID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE			RATE
IDMI	Total	. 36	Minus	**	<u> </u>	=	$\left \cdot \right $	x\$11=		OR		x\$22=
AMENDMENT	Independent	. 3	Minus	***	4	=		x41=		OR		x82=
⋖	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR		+270=
~ ~ If	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											



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NOTICE OF FILING/CLAIM FEE(S) DUE TO ENSURE PROPER CREDIT OF FEES PLEASE PETURN & COPY

TO ENSURE PROPER CREDIT OF FEES, PLEASE RETURN A COPY OF THIS FEE CALCULATION SHEET WITH YOUR RESPONSE.

APPLICA'	TION	NUMBER:	09122144	
	. دوسیم در بود	1.20		

Total Fee Calculation

• • • • • • • • • • • • • • • • • • •		Total	Number		•		· ·	- 2
· 1	Fee Code	# Claims	Extra	X	Fœ	Fee =	<u>Total</u>	
	Sm./Lg.				Sm. Entity	Lg. Entity		
Basic Filing Fee	201/101	se j					790, X)
Total Claims >20	203/103	-20 =	<u>.</u>	x	· ————		660.00	
Independent Claims >3	202/102	-3 =		x			82.10	
Mult. Dep Claim Present	204/104						270,00	
Surcharge	205/105					-	13000	The state of the s
English Translation	139							100 mm 1
TOTAL FEE CALCUL	ATTON					.	1932	O)
East dua una flian						·		

Fees due upon filing the application:

Total Filing Fees Due = \$	1,932.00
	/
Less Filing Fees Submitted -\$	
	· .

BALANCE DUE

=s 1,932.00

Office of Initial Parent Examination